Revised December 1974

CALIFORNIA LIQUID WASTE HAULER RECORD

STATE WATER RESOURCES CONTROL BOARD
STATE DEPARTMENT OF HEALTH

SFUND RECORDS CTR 999085201

STATE DEPARTMENT OF HEALTH	
PRODUCER OF WASTE (Must be filled by producer)	HAULER OF WASTE (Must be filled by hauler)
Hame (print or type): KORODY COLYAR MFC	Name (print or type): Superior Industrial Pumping 27
Pick up Address: 445 N. MARINE AM MICRINEL GOD No.	D 0 7 50000 90050°
Telephone Number: 0/2 (Mumber) (Street) (City) Telephone Number: 0/2 (Mumber) F.O. or Contract No.;	Telephone Number: 757-1855 Pick Up: (Date) 1855
Order Placed By: BB HAYDEN Data: 7 30 8	State Liquid Waste Hauler's Registration No. (if applicable): 183
Type of Process	Job No.: 1600 No. of Loads or Trips: / Unit No.: 2-
which Produced Wastes: (Examples: metal plating, equipment cleaning, oil drillingCode No.	Vehicle:
wastewater treatment, pickling bath, petroleum refining)	
DESCRIPTION OF WASTE (Must be filled by producer)	facility named below and was accepted. I certify (or declare) under penalty
Check type of westes: 1. Acid solution 8. Ank_bottom sediment	of perjury that the foregoing is true
2. Alkaline solution 9. 7 01150	DISPOSER OF WASTE (Must light the disposer)
4. [] Paint sludge 11. [] Contaminated soil and sand	DISPOSER OF WASTE (Must Die Fried by disposer)
6. Tetraethyl lead sludge 13. Litter waste	hame (print or type):
7. [] Chemical toilet wastes 14. [] Hug and water 15. [] Brine	The hauler above delivered the described waste Colifs 21:754 facility and
Other (Specify)	The hauler above delivered the described waste books allowed facility and it was an acceptable material under the terms of RWQCB requirements. State
Code No.	Department of Health regulations and local restrictions.
Components: (Examples: Nydruchloric scid, lime, caustic sode, Concentration:	Quantity measured at site (if applicable): State tee (if any):
phenolics, solvents (list), metals (list), Upper Lower % ppm	Handling Method(s):
organics (list), cyanide)	recovery
<u> </u>	treatment (specify):
	treatment (specify): (Examples: incineration, neutralisation, precipitation)Code No. disposal (specify): pond spreading
<u>- </u>	other (specify): / / Gode, No.
<u> </u>	If waste is held for disposal elsewhere specify final recation / _]
<u></u>	Disposal Date: 3-/- 80
<u>6.</u>	I certify (or declare) under penalty of perjury that the foregoing is true
Hasardous Properties of Waste:	and correct. Signature of suthorized agent and title
pHnonetoxicflammablecorrosiveexplosive	The site operator shall submit a legible copy of each completed Record to the
Bulk Volume: Soll Leal Lone Larrels other (specify)	State Department of Health with monthly fee reports.
Containers:	
(Number) drums cartons bags other Physical State:	/ / G
Specisl Handling Instructions (if any):	1
	Λ 1
	11 020
The waste is described to the best of my ability and it was delivered to	N'alsa
a licensed liquid waste hauler (if applicable)	FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING
I certify (or declare) under penalty of perjury that the foregoing is true	HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.
and correct.	,